

Assembly Concurrent Resolution

No. 77

Introduced by Assembly Member Mark Stone

May 20, 2015

Assembly Concurrent Resolution No. 77—Relative to California Early Intervention Services Act.

LEGISLATIVE COUNSEL’S DIGEST

ACR 77, as introduced, Mark Stone. California Early Intervention Services Act.

This measure would recognize that every child who needs comprehensive health and early intervention services and supports in order to achieve his or her developmental potential have those services easily accessible, sufficient, responsive, timely, and of high quality. The measure would further urge the Legislature to leverage existing efforts and statutes to ensure an accountable, results-oriented, and coordinated network of resources in order to provide multidisciplinary early identification and intervention services and supports to California infants and toddlers.

Fiscal committee: no.

- 1 WHEREAS, The period between a child’s birth and third
- 2 birthday is a time of intense and ongoing development across the
- 3 cognitive, motor, language, and social-emotional domains; and
- 4 WHEREAS, Positive health and learning outcomes depend upon
- 5 children continually building new skills and abilities along a
- 6 developmental trajectory of incremental milestones that begins at
- 7 birth; and

1 WHEREAS, The Legislature passed Assembly Concurrent
2 Resolution 155 in 2014 in recognition that “research over the last
3 two decades in the evolving fields of neuroscience, molecular
4 biology, public health, genomics, and epigenetics reveals that
5 experiences in the first few years of life build changes into the
6 biology of the human body that, in turn, influence the person’s
7 physical and mental health over his or her lifetime”; and

8 WHEREAS, Adversity during the early years can impair
9 development, and has a cumulative impact, with children exposed
10 to maltreatment and additional risk factors facing increased
11 likelihood of having one or more delays in their cognitive,
12 language, or emotional development; and

13 WHEREAS, Unaddressed developmental delays and disabilities
14 result in persistently impaired learning and health outcomes for
15 children; and

16 WHEREAS, It is estimated that one in four California children
17 have moderate or higher risk for a developmental delay, such as
18 speech or language impairment, and that nationally one in every
19 68 children were affected by autism spectrum disorder in 2014;
20 and

21 WHEREAS, Latino and African American children are more
22 likely to experience barriers in accessing early identification and
23 intervention services; and

24 WHEREAS, The Legislature has previously established through
25 the California Early Intervention Services Act, in Section 95001
26 of the Government Code, that “there is a need to provide
27 appropriate early intervention services individually designed for
28 infants and toddlers ... who have disabilities or are at risk of having
29 disabilities, to enhance their development and to minimize the
30 potential for developmental delays”; and

31 WHEREAS, The California Early Intervention Services Act
32 additionally established that “early intervention services for infants
33 and toddlers with disabilities or who are at risk of having
34 disabilities represent an investment of resources, in that these
35 services reduce the ultimate costs to our society, by minimizing
36 the need for special education and related services in later school
37 years... [and that] maximize the potential of the individuals to be
38 effective in the context of daily life and activities;” and

39 WHEREAS, Early intervention services include targeted health
40 and education supports for infants and toddlers who have delays

1 or are at risk of having delays, in order to enhance their
2 development, improve school readiness, and minimize the potential
3 for later challenges; and

4 WHEREAS, The California Early Intervention Services Act
5 previously established that “the earlier intervention is started, the
6 greater is the ultimate cost-effectiveness and the higher is the
7 educational attainment and quality of life achieved by children
8 with disabilities”; and

9 WHEREAS, Experts like the American Academy of Pediatrics
10 recommend routine, regular, formalized developmental and
11 behavioral screening for all infants and toddlers as the most
12 effective way of identifying children in need of supports and
13 services; and

14 WHEREAS, Fewer than one-third of California infants and
15 toddlers received the recommended developmental and behavioral
16 screenings according to 2011–2012 parent reported data; and

17 WHEREAS, forty-one percent of parents report having one or
18 more concerns about their children’s physical, behavioral or social
19 development; and

20 WHEREAS, Nearly three out of four California children with
21 special health care needs under three years of age do not receive
22 early intervention services they could benefit from, and the 2012
23 annual report for California’s Early Start program shows that it
24 serves fewer infants and toddlers with early intervention services
25 than the national average; and

26 WHEREAS, A system of universal developmental and
27 behavioral screenings should work hand in hand with a robust
28 early intervention system, and should be linked by facilitated
29 family-focused referral, care coordination, child-centered health
30 homes, and information-sharing mechanisms to guide and support
31 families while maintaining accountability; and

32 WHEREAS, The California Early Intervention Services Act
33 previously established that “the State Department of Developmental
34 Services, the State Department of Education, the State Department
35 of Health Care Services, and the State Department of Social
36 Services coordinate services to infants and toddlers with disabilities
37 and their families”; and

38 WHEREAS, The California Early Intervention Services Act
39 additionally established that “families be well informed, supported,

1 and respected as capable and collaborative decisionmakers
2 regarding services for their child”; now, therefore, be it

3 *Resolved by the Assembly of the State of California, the Senate*
4 *thereof concurring*, That every California child deserves periodic
5 formal assessment of his or her development for the purposes of
6 introducing supports and services if needed; and be it further

7 *Resolved*, That every child who needs supports in order to
8 achieve his or her developmental potential deserves that those
9 services be easily accessible, sufficient, responsive, timely, and
10 of high quality; and be it further

11 *Resolved*, That every parent or caregiver shall be fully engaged
12 and supported throughout early identification and intervention
13 processes; and be it further

14 *Resolved*, That the Legislature leverage existing efforts and
15 statutes to ensure an accountable, results-orientated, and
16 coordinated statewide network of resources, services, systems, and
17 strong local infrastructures, in order to provide family-centered,
18 comprehensive, multidisciplinary early identification and
19 intervention services and supports to California infants and
20 toddlers; and be it further

21 *Resolved*, That the Legislative shall support and promote
22 community-driven efforts to coordinate referrals and linkages
23 between, and guide families through the complexities of, the early
24 identification and intervention systems, through programs and
25 models such as Help Me Grow California; and be it further

26 *Resolved*, That the Legislative invest sufficiently in
27 comprehensive health and early intervention services and supports
28 in order to ensure that they meet the health and learning needs of
29 California’s diverse child population, and wisely harness
30 governmental and other resources toward these common goals;
31 and be it further

32 *Resolved*, That these services and supports build upon existing
33 efforts, and be embedded and accessible from the places and people
34 that families know and trust, including pediatric practices and other
35 health settings, community-based organizations, regional centers,
36 Early Head Start programs, First 5s, and other local early childhood
37 programs; and be it further

- 1 *Resolved*, That the Chief Clerk of the Assembly transmit copies
- 2 of this resolution to the author for appropriate distribution.

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